plication or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

@64014

i i i i i i i i i i i i i i i i i i i	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			\9					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			\○ minus 20=		* e			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			☐ minus 3 =		•			X40=		OR	X80=	580
MUI	TIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	
* If 1	he difference i	n column 1 is	less than zer	o, ente	r "0" in c	olumn 2	ı	TOTAL		OR	TOTAL	5796.
CLAIMS A'S AMENDED - PART II (Column 1) (Column 2) (Column 3)							<u>)</u>	SMALL E	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI PAID	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOM	Total	. 10	Minus	** 6	20	= ,	<b>[</b>	X\$ 9=		OR	X\$18=	
AME	Independent	. 4	Minus	***	T CLAIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF M			OLTIPLE DEP	ENDEN	I CLAIM		J	+135=		OR	+270=	
	•						ı	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
	:	<u>`</u>	ADDII. 1 EE 1									
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY DFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	. 9	Minus	** (	20	=		X\$ 9=		OR	X\$18=	
AME	Independent FIRST PRESE	* 3	Minus	***	TCLAIM	= '	-	X40=		OR	X80=	
	FIRST PRESE	NIATION OF M	OLITE DEF	CINDEIN	CLAIM			+135=		OR	+270=	
							1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	4	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ال			1	070	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
I	"It the "Highest Nu The "Highest Num	nher Previously	aid For" (Total o	r Indeper	_ is less u ident) is th	e highest num	ber fo	ound in the ap	propriate bo	x in co	olumn 1.	